## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

| CLAIMS AS FILED - PART I                                  |  |  |   |                              |   |                  |            | SMALL ENTITY TYPE   |                        |            | OTHER                      |                        |
|---|--|--|---|------------------------------|---|------------------|------------|---------------------|------------------------|------------|----------------------------|------------------------|
| <u> </u>  |  |  | (Column   | 1)                           | (1  | Column 2)        |            | TYPE                |                        | OR         | SMALL E                    | NTITY                  |
| U.S.  | NATIONAL S                               | STAGE FEES                                   |   |                              |   |                  |            | RATE                | FEE .                  |            | RATE                       | FEE                    |
| BAS   | IC FEE                                   | ***  | SMALL ENT.  | = \$ 150                     | LARGE ENT. = \$ 300                       |                  |            | BASIC FEE           |                        | OR         | BASIC FEE                  | 340                    |
| EXA   | MINATION FE                              | E  | Satisfies PCT Art<br>(4) = \$50 /                   |                              | All other situations =<br>\$ 100 / \$ 200 |                  |            | EXAM. FEE           |                        |            | EXAM. FEE                  | 200                    |
| SEA   | RCH FEE                                  | -  | U.S. is ISA = \$<br>ALL other cour<br>\$ 200 / \$ 4 | ntries =                     | ALL other situations =<br>\$ 250 / \$ 500 |                  |            | SEARCH FEE          |                        |            | SEARCH FEE                 | 400                    |
| FEE FOR EXTRA SPEC. PGS.                                  |  |  | minus 100 =   |                              | / 50 =                                    |                  |            | X \$ 125 =          |                        |            | X \$ 250 =                 | 5                      |
| тот   | AL CHARGEA                               | BLE CLAIMS                                   | 7 min   | us 20 =                      | • •                                       |                  |            | X \$ 25 =           |                        | OR         | X \$ 50 =                  |                        |
| INDE  | PENDENT CL                               | AIMS   | 2 "   | inus 3 =                     |   |                  |            | X \$ 100 =          |                        | OR         | X \$ 200 =                 |                        |
| MUL   | TIPLE DEPEN                              | DENT CLAIM PRE                               | SENT  |                              |   |                  |            | + \$ 180 =          |                        | OR         | + \$ 360 =                 |                        |
| * If  | the difference                           | in column 1 is l                             | ess than zero                                       | ss than zero, enter "0" in o |   |                  |            | TOTAL               |                        | OR         | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column |  |  |   |                              |   |                  |            | SMALL ENTITY OF     |                        |            | OTHER THAN<br>SMALL ENTITY |                        |
| ۷<br>خ  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    |   |                              | IBER<br>OUSLY                             | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                       | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total                                    | *  | Minus   | **                           |   | -                |            | X \$ 25 =           |                        | OR         | X \$ 50 =                  |                        |
| AME   | Independent                              | *  | Minus   | ***                          |   | =                |            | X \$ 100 =          |                        | OR         | X \$ 200 =                 |                        |
|   | FIRST PRES                               | ENTATION OF M                                | ULTIPLE DEPE  | NDENT                        |   |                  | + \$ 180 = |                     | OR                     | + \$ 360 = |                            |                        |
|   |  |  |   |                              |   |                  |            | TOTAL ADDIT.<br>FEE |                        | OR         | TOTAL ADDIT.<br>FEE        |                        |
|   | *  | (Column 1)                                   |   | (Colu                        | mn 2)                                     | (Column 3)       |            |                     |                        | _          |                            |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    |   | HIGH<br>NUM<br>PREVI<br>PAID | IBER<br>OUSLY                             | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total                                    | •  | Minus   | **                           |   | =                | l          | X \$ 25 =           |                        | OR         | X \$ 50 =                  |                        |
|   | Independent                              | *  | Minus   | ***                          |   | =                |            | X \$ 100 =          |                        | OR         | X \$ 200 =                 |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT |  |   |                              | CLAIM                                     |                  |            | + \$ 180 =          |                        | OR         | + \$ 360 =                 |                        |
|   |  |  |   |                              |   | -                |            | TOTAL ADDIT.<br>FEE |                        | or         | TOTAL ADDIT.               |                        |
|   |  |  |   |                              |   |                  |            |                     |                        |            |                            |                        |
|   |  |  |   |                              |   |                  |            |                     |                        |            |                            |                        |
| *   |  | umn 1 is less than th<br>umber Previously Pa |   |                              |   |                  |            |                     |                        |            |                            |                        |
|   | If the "Highest N                        | umber Previously Pa                          | id For" IN THIS SF                                  | PACE is fe                   | ss than '3                                | ", enter "3".    |            |                     | v in antuma 1          |            |                            |                        |